

POLITICAL COMMITTEE AFFIDAVIT OF DISSOLUTION

FORM PAC - DR

The Instruction Guide explains how to complete this form.

•• Complete only if "Report Type" on page 1 is marked "Dissolution" ••

1 COMMITTEE NAME

SAVE OUR AQUIFER

2 ACCOUNT #

(Ethics Commission filers)

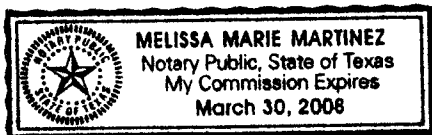
3

Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.


 Signature of campaign treasurer

DO NOT SIGN UNLESS
POLITICAL COMMITTEE IS TO BE DISSOLVED



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said John C. Larralde, this 10 day
of July, 2004, to certify which, witness my hand and seal of office.

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2004 JUL 20 A 10:30

Melissa M Martinez
Signature of officer administering oath

Melissa M Martinez
Printed name of officer administering oath

Notary Public
Title of officer administering oath



SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)		2 Total pages filed:	
3 COMMITTEE NAME SAVE OUR AQUIFER				OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2108 N. MAIN SAN ANTONIO, TX 78212		Date Received	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI MR. JOHN NICKNAME LAST SUFFIX LARRALDE		Receipt # Amount	
				Date Processed	
				Date Imaged	
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 100 N.E. LOOP 410 SUITE 800 SAN ANTONIO, TX 78216			
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (210) 524-4114			
9 REPORT TYPE		<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> Dissolution (attach PAC-OR) <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED		Month Day Year 01 / 01 / 2004 THROUGH 07 / 12 / 2004			
11 ELECTION		ELECTION DATE Month Day Year / / ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special			
GO TO PAGE 2					

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE
NAME

ACCOUNT #
(Ethics Commission filers)

13 COMMITTEE
PURPOSE

(Attach lists on plain
paper to complete this
report if necessary.)

☐ SUPPORT
(Candidate or Measure)

☒ OPPOSE
(Candidate or Measure)

☐ ASSIST
(Officeholder)

☐ CANDIDATE

☐ OFFICEHOLDER

☒ MEASURE

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

BALLOT IDENTIFICATION / #

95579

ELECTION DATE
Month Day Year

DESCRIPTION

CIBOLA CANYON CONSERVATION DISTRICT #1

14 CONTRIBUTION
TOTALS

EXPENDITURE
TOTALS

CONTRIBUTION
BALANCE

OUTSTANDING
LOAN TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ -0-

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ -0-

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ -0-

4. TOTAL POLITICAL EXPENDITURES

\$ -0-

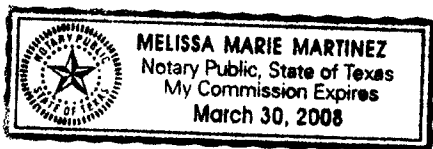
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF THE REPORTING PERIOD

\$ -0-

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ -0-

15 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying
report is true and correct and includes all information required to be
reported by me under Title 15, Election Code.

John C. Larralde
Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said John C. Larralde, this the 12 day
of July, 20 04, to certify which, witness my hand and seal of office.

Melissa M Martinez Melissa M Martinez Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath